MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10542949
FILING DATE 7-21-05
APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT				AS FILED		AFTER 1ˢᵗ AMENDMENT		AFTER 2ⁿᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1			1				51						
2		1		1				52						
3								53						
4								54						
5								55						
6								56						
7								57						
8								58						
9	1			1				59						
10								60						
11								61						
12								62						
13								63						
14	1		1					64						
15		1		1				65						
16		2		1				66						
17	1		1					67						
18		1						68						
19								69						
20								70						
21								71						
22								72						
23								73						
24								74						
25								75						
26								76						
27								77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	4	↓	4	↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	17	←	14	←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	21		16					TOTAL CLAIMS						

PTO-1360 (REV. 11/00)